

Status: Finalized

## I. Center Identification

Organization Name: INDIANA ENDOSCOPY CENTERS

Street Address: 1801 N. Senate Blvd, Suite 710

City: Indianapolis

County: Marion

Administrator Name: Amy Heminger

Administrator Email: aheminge@iuhealth.org

ASC Web Address:

Fiscal Year: 2015

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes O No

Corporate Tax Status: • For Profit • Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	4	
Number of procedure rooms	0	

## III. Utilization Statistics

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	4060	4640		
B. Ten Most Frequent Surgical Procedures Perfor	med	Total Procedures		
45385		928		
43239		854		
45378		686		
45380		676		

G0121	240
43235	209
G0105	145
43248	75
45388	71
45330	31

## IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	0
a surgical encounter.	